



[Signature]

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application No.	10/815,057
		Filing Date	March 30, 2004
		First Named Inventor	Robert M. Reinschmidt
		Art Unit	2819
		Examiner Name	Tan, Vibol
Total Number of Pages in This Submission	28	Attorney Docket Number	16820P281

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input checked="" type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	<div style="border: 1px solid black; padding: 5px;">Fig. 1 Annotated and Replacement Sheets (2 pp.); Transmittal of Formal Drawings (6 pp.).</div>
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s)	
<input checked="" type="checkbox"/> PTO/SB/08		
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Basic Filing Fee		
<input type="checkbox"/> Declaration/POA		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Chui-Kiu Teresa Wong, Reg. No. 48,042 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	<i>[Signature]</i>
Date	July 29, 2005

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Typed or printed name	Dianne Neathery		
Signature	<i>Dianne Neathery</i>	Date	July 29, 2005

Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (WTR) 06/04/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450



FEET TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)

580.00

Complete if Known

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First Named Inventor	Robert M. Reinschmidt
Examiner Name	Tan, Vibol
Art Unit	2819
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METHOD OF PAYMENT (check all that apply)

- Check Credit card Money Order None Other (please identify): _____
- Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
- Charge any additional fee(s) or underpayment of fee(s) Credit any overpayments
- under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

FEE CALCULATION

1. EXTRA CLAIM FEES

			Extra Claims		Fee from below		Fee Paid
Total Claims	18	20*	=	0	X	50.00	\$0.00
Independent Claims	5	3*	=	2	X	200.00	\$400.00
Multiple Dependent							

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	360	2203	180	Multiple Dependent claim, if not paid
1204	300	2204	150	**Reissue independent claims over original patent
1205	300	2205	150	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (1)		(\$)		400.00

**or number previously paid, if greater, For Reissues, see below

2. ADDITIONAL FEES

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
2053	130	2053	130	Non-English specification	
1251	120	2251	60	Extension for reply within first month	
1252	450	2252	225	Extension for reply within second month	
1253	1,020	2253	510	Extension for reply within third month	
1254	1,590	2254	795	Extension for reply within fourth month	
1255	2,160	2255	1,080	Extension for reply within fifth month	
1401	500	2401	250	Notice of Appeal	
1402	500	2402	250	Filing a brief in support of an appeal	
1403	1,000	2403	500	Request for oral hearing	
1451	1,510	2451	1,510	Petition to Institute a public use proceeding	
1460	130	2460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	180.00
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify)		SUBTOTAL (2)		(\$)	180.00

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Chui-Kiu Teresa Wong	Registration No. (Attorney/Agent)	48,042	Telephone	(408) 720-8300
Signature				Date	07/29/05



DOCKET NO.: 16820P281

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:

ROBERT M. REINSCHMIDT

Application No.: 10/815,057

Filed: March 30, 2004

For: **A LVDS Output Driver Having Low Supply Voltage Capability**

Art Group: 2819

Examiner: Tan, Vibol

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL OF FORMAL DRAWINGS

Sir:

Enclosed herewith for filing in the above-identified U.S. Patent Application are the formal drawings, 5 sheets including 5 Figures. Please charge any additional fees or credit any overpayment to Deposit Account No. 02-2666. A duplicate copy of the Fee Transmittal is enclosed for this purpose.

Respectfully submitted,
Blakely, Sokoloff, Taylor & Zafman LLP

Dated: July 29, 2005

Chui-Kiu Teresa Wong, Reg. No. 48,042

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Los Angeles, CA 90025
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